MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10712900

FILING DATE

APPLICANT(S)

CLAIMS

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
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50						
TOTAL IND.	1					
TOTAL DEP.	8		8		7	
TOTAL CLAIMS	9		9		9	

		IND	DEP	IND	DEP	IND	DEP
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100							
TOTAL IND.							
TOTAL DEP.							
TOTAL CLAIMS							

PTO-1360 (Replication only) (3/03)